

Putting Research to Work for Military Families



Focus:
Air Force

Guilt is More Strongly Associated With Suicidal Ideation Among Military Personnel With Direct Combat Exposure

Bryan, C. J., Ray-Sannerud, B., Morrow, C. E., & Etienne, N. (2013). Guilt is more strongly associated with suicidal ideation among military personnel with direct combat exposure. *Journal of Affective Disorders*, 148(1), 37-41.
doi:10.1016/j.jad.2012.11.044

SUMMARY: Active Duty Air Force personnel who were seeking outpatient mental health treatment participated in a study examining the interactive effect of direct combat exposure and guilt on suicidal ideation. There was a stronger relationship between guilt and suicidal ideation for those who endorsed direct combat exposure compared to those who did not.

KEY FINDINGS:

- Guilt was positively associated with suicidal ideation; more guilt corresponded to higher levels of suicidal ideation.
- This association was especially pronounced for Airmen who had direct combat exposure.
- Depression, posttraumatic stress disorder (PTSD) symptoms, and perceived burdensomeness did not show a differential relationship with suicidal ideation according to direct combat exposure.
- Hopelessness showed a stronger, but non-significant, relationship with suicidal ideation among Veterans who have been involved in direct combat compared to those without combat exposure.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Offer classes for family members on how to be supportive to Service members facing mental health concerns after deployment
- Conduct installation-wide awareness campaigns regarding depression and suicidal ideation, encouraging Service members and families to be aware of these mental health concerns and to seek professional help when indicated
- Continue to provide reintegration programs to all Service members returning from deployment

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend incorporating specific screening of guilt among Service members after deployment
- Support efforts aimed at reducing stigma regarding help seeking for mental health issues among Service members
- Continue to support services that work with Service members coping with mental health issues, including crisis hotlines, peer support programs, and mental health services

This product is the result of a partnership funded by the Department of Defense between the Office of Military Community and Family Policy and the USDA's National Institute of Food and Agriculture through a grant/cooperative agreement with The University of Minnesota.



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METHODS

- Active Duty Air Force personnel receiving outpatient mental health treatment at two military clinics in the Southern and Western U.S.
- Participants were recruited via clinic staff.
- Participants completed an anonymous packet of questionnaires in the clinic waiting room that included measures of suicidal ideation, self-injurious behavior and thoughts, hopelessness and pessimism, depression, PTSD, perceived burden on others, and guilt.

PARTICIPANTS

- Ninety-seven Active Duty Air Force personnel participated.
- The majority of participants were male (59%), White (68%), and had an average age of 34.13 years (SD = 8.69 years).
- Military rank included: 42% non-commissioned officer (E5-E6), 24% junior enlisted (24%), and 20% officers (O1-O6).

LIMITATIONS

- The sample size was small which may have limited the ability to detect some of the relationships.
- The sample was all Active Duty Air Force personnel who were seeking mental health treatment; therefore, findings may not generalize to other branches or to those Service members not seeking mental health treatment.
- This study did not assess for exposure to different kinds of combat; these exposures could be differentially related to guilt and suicide risk.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Collect data from clinical and non-clinical settings to increase generalizability
- Use structured clinical interviews (rather than solely self-report measures) to strengthen these conclusions
- Replicate the study with Service members from other military branches

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